

<b>TRAVEL VOUCHER</b>  <i>(Read Privacy Act Statement below)</i>		<b>1. DEPARTMENT OR ESTABLISHMENT BUREAU DIVISION OR OFFICE</b>  GEPA27OARAA-HQ		<b>2. TYPE OF TRAVEL</b> <input checked="" type="checkbox"/> TEMPORARY DUTY <input type="checkbox"/> PERMANENT CHANGE OF STATION		<b>3. VOUCHER NO.</b> JBATLANTACOB041810_V01-	
<b>5. a. NAME (Last, first, middle initial)</b>  BEALE, JOHN  <b>c. MAILING ADDRESS (Include ZIP Code)</b> <div style="background-color: black; width: 100px; height: 20px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100px; height: 20px; margin-bottom: 5px;"></div> <b>e. PRESENT DUTY STATION</b> EPA		<b>b. SOCIAL SECURITY NO.</b>  EPA-00-002260  <b>d. OFFICE TELEPHONE NO.</b> <div style="background-color: black; width: 100px; height: 20px; margin-top: 10px;"></div>		<b>4. SCHEDULE NO.</b>		<b>6. PERIOD OF TRAVEL</b> a. FROM 04/19/10 b. TO 04/22/10	
				<b>7. TRAVEL AUTHORIZATION</b> a. NUMBER(S) 0QGHG1 b. DATE(S) 04/14/10			
				<b>10. CHECK NO.</b>			
<b>8. TRAVEL ADVANCE</b> a. Outstanding 0.00 b. Amount to be applied 0.00 c. Amount due Government (Attached <input type="checkbox"/> Check <input type="checkbox"/> Cash) D. Balance outstanding		<b>9. CASH PAYMENT RECEIPT</b> a. DATE RECEIVED b. AMOUNT RECEIVED \$ c. PAYEE'S SIGNATURE		<b>11. PAID BY</b>			
<b>12. GOVERNMENT TRANSPORTATION REQUESTS, OR TRANSPORTATION TICKETS, IF PURCHASED WITH CASH</b> <i>(List by number below and attach passenger coupon; if cash is used show claim on reverse side)</i>		I hereby assign the United States any right I may have against any parties in connection with reimbursable transportation charges described below, purchased under cash payment procedures (FPMR 101-7) <span style="float: right;">▶ <b>Traveler's Initials</b></span>					
		<b>AGENT'S VALUATION OF TICKET</b>  (a)	<b>ISSUING CARRIER</b> <i>(Initials)</i> (b)	<b>MODE CLASS OF SERVICE AND ACCOMMODATIONS</b>  (c)	<b>DATE ISSUED</b>  (d)	<b>POINTS OF TRAVEL</b>	
						FROM (e)	TO (f)
0414101435KS OXMS 006788202436 6 ACCOUNTING CLASSIFICATION: 10 Immediate Office-0AT^20102011^B^27A^105A46C^^^AP27^^^ - 0.00 COMMENTS: To attend an Environmental Economics Conference		28.25  541.40	XD  DL	    	04/14/10  04/14/10	DCA-Washington, ATL-Atlanta, Ga (U       1,113.73 NR-	
<b>13. I certify that this voucher is true and correct to the best of my knowledge and belief, and that payment or credit has not been received by me. When applicable, per diem claimed is based on the average cost of lodging incurred during the period covered by this voucher.</b>  <b>TRAVELER SIGN HERE</b> ▶ <span style="float: right;"><b>DATE</b> <b>AMOUNT CLAIMED</b> ▶ 1113.73</span>						NOTE: Falsification of an item in an expense account works a forfeiture of claim (28 U.S.C. 2514) and may result in a fine of not more than \$10,000 or imprisonment for not more than 5 years or both (18 U.S.C. 287; i.d. 1001).	
<b>14. This voucher is approved. Long distance phone calls, if any, are certified as necessary in the interest of the Government. (NOTE: If long distance telephone calls are included, the approving official must have been authorized in writing by the head of the department or agency to so certify (31 U.S.C. 680a).)</b>  <b>APPROVING OFFICIAL SIGN HERE</b> ▶ <span style="float: right;"><b>DATE</b></span>				<b>17. FOR FINANCE OFFICE USE ONLY</b> <b>COMPUTATION</b> a. DIFFERENCES, IF ANY (Explain and show amount)		\$	
<b>15. LAST PRECEDING VOUCHER PAID UNDER SAME TRAVEL AUTHORIZATION</b> a. VOUCHER NO. b. D.O. SYMBOL c. MONTH & YEAR				b. TOTAL VERIFIED CORRECT FOR CHARGE TO APPROPRIATION  Certifier's initials:		\$ 0.00	
<b>16. THIS VOUCHER IS CERTIFIED CORRECT AND PROPER FOR PAYMENT</b>  <b>AUTHORIZED CERTIFYING OFFICIAL SIGN HERE</b> ▶ <span style="float: right;"><b>DATE</b></span>				c. APPLIED TO TRAVEL ADVANCE (Appropriation symbol):		\$ 0.00	
				d. <b>NET TO TRAVELER</b> ▶		\$ 1113.73	
<b>18. ACCOUNTING CLASSIFICATION</b> SEE BLOCK 12 ABOVE							

<b>SCHEDULE OF EXPENSES AND AMOUNTS CLAIMED</b>	<b>INSTRUCTIONS TO TRAVELER</b> <i>(Unlisted items are self explanatory)</i> <div style="display: flex; justify-content: space-between;"> <div style="width: 30%;"> Col. (c) If the voucher includes per diem allowances for members of employee's immediate family, show members' names, ages, and relationships to employee and marital status of children (unless information is shown on the travel authorization.) </div> <div style="width: 30%;"> Complete only for actual expense travel </div> <div style="width: 35%;"> Col. (d) thru (g) Show amount incurred for each meal, including tax and tips, and daily total meal cost.  (h) Show expenses, such as: laundry, cleaning and pressing of clothes, tips to bellboys, porters, etc. (other than for meals).  (i) Complete for per diem and actual expense travel.  (j) Show total subsistence expense incurred for actual expense travel.  (m) Show per diem amount, limited to maximum rate, or travel on actual expense, show the lesser of the amount from col. (j) or maximum rate.  (n) Show expenses, such as: taxi/limousine fares, air fare (if purchased with cash), local or long distance telephone calls for Government business, car rental, relocation other than subsistence, etc. </div> </div>										Complete this information if this is a continuation sheet.
	PAGE <u>2</u> OF <u>1</u> PAGES <b>TRIP # 1</b>										
	<b>TRAVEL AUTHORIZATION NO.</b> 0QGHG1  <b>TRAVELER'S LAST NAME</b> BEALE										

DATE 10 20	TIME  (Hour and am/pm)	DESCRIPTION  (Departure/arrival city, per diem computation, or other explanation of expenses)	ITEMIZED SUBSISTENCE EXPENSES							MILEAGE RATE: 0.000 NO. OF MILES	AMOUNT CLAIMED		
			MEALS				MISCELLANEOUS SUBSISTENCE	LODGING	TOTAL SUBSISTENCE EXPENSE		MILEAGE	SUBSISTENCE	OTHER
			BREAK-FAST	LUNCH	DINNER	TOTAL							
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)
04/19		D-:RES: ██████ N,											
04/19		Air Fare on IBA (GOVCC-I)								0.00			54.40
04/19		A-:ATLANTA (COBB C				42.00		109.00	151.00			151.00	
04/19		TMC FEE (GOVCC-I)								0.00			28.25
04/19		Credit Card charge											7.58
04/20		Subsistence				56.00		109.00	165.00			165.00	
04/21		Subsistence				56.00		109.00	165.00			165.00	
04/22		D-:ATLANTA (COBB C											
04/22		A:RES: ██████,											
04/22		Subsistence				42.00			42.00			42.00	
04/22		TAV Fee -I											13.50
									SUBTOTALS	▶	0100	523100	590173
If additional space is required, continue on another 1012-A BACK, leaving the front blank.									TOTALS	▶	0100	523100	590173

<p>If additional space is required, continue on another 1012-A BACK, leaving the front blank.</p>	<p>In compliance with the Privacy Act of 1974, the following information is provided: Solicitation of the information on this form is authorized by 5 U.S.C. Chap. 57 as implemented by the Federal Travel Regulations (FPMR 101 7), E.O. 11609 of July 22, 1971, E.O. 11012 of March 27, 1962, E.O. 9397 of November 22, 1943, and 26 U.S.C. 6011(b) and 6109. The primary purpose of the requested information is to determine payment or reimbursement to eligible individuals for allowable travel and/or relocation expenses incurred under appropriate administrative authorization and to record and maintain costs of such reimbursements to the Government. The information will be used by officers and employees who have a need for the information in the performance of their official duties. The information may be disclosed to appropriate Federal, State, local or foreign agencies, when relevant to civil,</p>	<p>requirement by this agency in connection with the hiring or firing of an employee, the issuance of a security clearance, or investigations of the performance of official duty while in Government service. Your Social Security Account Number (SSN) is solicited under the authority of the Internal Revenue Code (26 U.S.C. 6011(b) and 6109) and E.O. 9397, November 22, 1943, for use as a tax payer and/or employee identification number; disclosure is MANDATORY on vouchers claiming travel and/or relocation allowance expense reimbursement which is, or may be, taxable income. Disclosure of you SSN and other requested information is voluntary in all other instances; however, failure to provide the information (other than SSN) required to support the claim may result in delay or loss of reimbursement.</p>
		Enter grand total of columns (l), (m) and (n), below and in item 13 on the front of this form.  <b>TOTAL AMOUNT CLAIMED</b> <span style="float: right;">1,113.73</span>

ACCOUNTING CLASS CODE			TRIP 1
COM. CARR.-I-2113			541.40
LODGING 2111-2111			327.00
M&IE 2111-2111			196.00
OTHER-2117			7.58
TAV EXP -I-2118			13.50
TMC FEE -I-2113			28.25
10 Immediate Office			
	0.00	0.00	1,113.73

0AT^20102011^B^27A^105A46C^^^AP27^^^

SPLIT PAY DISBURSEMENTS:

TOTAL EXPENSES -----	1,113.73
NON-REIMBURSABLE EXPENSES -----	0.00
	=====
TOTAL AMOUNT CLAIMED -----	1,113.73
PREV PAYMENTS --	1,464.79
GOV'T ADVANCE OUTSTANDING --	0.00
GOV'T ADVANCE APPLIED -----	0.00
	----
	0.00
	=====
NET TO TRAVELER (GOVT) -----	-351.06
GOV'T CHARGE CARD EXPENSES -	0.00
GOV'T CHARGE CARD ATM ADV --	0.00
ADD'L GOV'T CHARGE CARD PYMT	0.00
	=====
TOTAL GOV'T CHARGE CARD AMT	0.00
PAY TO GOV'T CHARGE CARD-----	0.00
PAY TO TRAVELER -----	-351.06

STATUS	DATE	TIME	SIGNATURE NAME
CREATED	04/23/10	11:23AM E	[REDACTED] N
VOUCHER PREPARED	04/23/10	11:38AM E	[REDACTED]
SIGNED	04/27/10	11:24AM E	JOHN BEALE
AUTHORIZED	04/29/10	12:01PM E	[REDACTED]
APPROVED	04/29/10	2:06PM E	[REDACTED]
STAT SAMPLING	04/30/10	9:07AM E	Paul Payment
PAY LINK	04/30/10	9:07AM E	Paul Payment
AUDIT PASS	04/30/10	9:07AM E	Paul Payment
OBLIGATION SUBMITTED	04/30/10	9:19AM E	Paul Payment
POSACK OBLIGATION	04/30/10	10:10AM E	Paul Payment
PAYMENT SUBMITTED	04/30/10	10:14AM E	Paul Payment
PAID	04/30/10	10:43AM E	Paul Payment
CREATED	05/03/10	10:08AM E	[REDACTED] N
VOUCHER PREPARED	05/03/10	10:11AM E	[REDACTED] IE
SIGNED	03/28/11	2:16PM E	JOHN BEALE
AUTHORIZED	03/29/11	5:23PM E	[REDACTED] e
APPROVED	03/30/11	1:40PM E	[REDACTED]
STAT SAMPLING	03/30/11	1:41PM E	Paul Payment
PAY LINK	03/30/11	1:41PM E	Paul Payment
AUDIT PASS	03/30/11	1:42PM E	Paul Payment
DUE US	03/30/11	1:42PM E	Paul Payment

I certify that the electronic signatures listed above are valid and on file.

SIGNED

DATE